

Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 2/19/2014

Address: HICKY RD N. OF SR 332

Case #: 14ISP01332

MORGANTOWN, IN

County: MORGAN

Type of Laboratory Seizure (check one)

- ☐ Operational Lab
☐ Chemical/Glassware/Equipment (only)
☒ Dumpsite (only)

Seizure Location (check all that apply)

- ☐ Residence
☐ Outbuilding
☐ Vehicle
☐ Hotel/Motel
☒ Open – No Structure
☐ Other: _____

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☒ Lithium/Ammonia Reaction(s): OPEN
☐ Red Phosphorous/Iodine Reaction(s): _____
☒ Flammable Solvents: OPEN
☒ Water Reactive Metal (Lithium): OPEN
☒ Hydrochloric Acid Gas Generator(s): OPEN
☐ Anhydrous Ammonia: _____
☐ Corrosive Acid: _____
☒ Corrosive Base: OPEN
☐ Other (item and location): _____

Child under age 18 discovered (check appropriate)

- ☐ Yes _____ (number present)
☒ No
☐ Children not present but evidence they reside or visit often
Living conditions of home: ☐ clean ☐ disarray ☐ unclean
Estimated length of time manufacturing had been occurring: _____
Additional Information: _____

This report has been faxed* to the following agencies that serve the location:

Fire Department: TWP FD
Health Department: MORGAN CO
Department of Child Services: _____

Fax: HAND DELIVERED
Fax: 765-342-1062
Fax: _____

For further information regarding this methamphetamine laboratory, contact
Investigating Officer: JON PATRICK Phone 812-332-4411

* This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.